



FY2005 Notice of Intent to Apply
Performing Arts Directory
THIS IS NOT AN APPLICATION

Please mail or fax this form by **February 1, 2004** to: Heather Lyons, Individual Artist Program Director, Kentucky Arts Council, Old Capitol Annex, 300 West Broadway, Frankfort, KY 40601 (fax 502-564-2839).

1. Individual or Group Name _____
2. Mailing Address _____
3. City _____
4. State _____
5. Zip Code _____
6. Phone Number _____
7. Fax Number _____
8. E-mail Address _____
9. Contact Person _____
10. Phone Number _____
11. E-mail Address _____
12. Have you ever applied for inclusion in the Performing Arts on Tour Directory?
☐ Yes Year _____ ☐ No

On one attached page, please include a brief description of you or your performing group.

Your Name _____ Title _____

Signature _____ Date _____

All signatures must be in RED ink.